

UAM OPERATING PROCEDURE 530.1

STUDENT ACCIDENT REPORT

Any faculty or staff responsible for a University-sponsored classroom, laboratory, or student activity (excluding intercollegiate athletics) in which a student is injured should complete a "Notice of Injury Form."

The completed form is to be forwarded to the individuals indicated on the form. If the student is an employee of the University and the accident is work related, then the supervisor should follow "UAM Operating Procedure 330.1, Workers Compensation."

Revised: July 1, 2011

Revised: July 1, 1996

September 13, 1993

**NOTICE of INJURY
REPORT**

Name of Injured Student: _____

Date of Injury: _____ Time of Injury: _____ am/pm

Location Where Injury Occurred: _____

Type and Description of Injury: _____

How was Injury Sustained? _____

List name, address, and phone number of all witnesses:

Did student receive medical attention? _____ Yes _____ No

Please explain:

General Comments:

Signed _____ Date of Report _____

Position/Title: _____

Send copies to:

	Vice Chancellor for Student Engagement or VC CTM or VC CTC
	Business Manager
	Student Health Services
	Supervisor of Facility Where Injury Occurred
	Supervisor of Person Completing this Report